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PART B - FEE(S) TRANSMITTAL

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transmitted to the USPTO, on the date indicated below. Janet MacLeod **Baker Botts** 30 Rockefeller Plaza 44th Floor New York, NY 10112-0228 (Sienano ATTORNEY DOCKET NO. CONFIRMATION NO. FIRST NAMED INVENTOR FILING DATE APPLICATION NO. A34641-PCT USA 7017 09/28/2001 Guorana Hu 09/937,721 TITLE OF INVENTION: HERBAL COMPOSITIONS AND USES FOR THE TREATMENT OF ALLERGIC REACTIONS PUBLICATION FEE TOTAL FEE(S) DUP DATE DUE ISSUE FEE SMALL ENTITY APPLN. TYPE 09/30/2004 \$665 nonprovisional YES \$665 CLASS-SUBCLASS ART UNIT EXAMINER 424-741000 WITZ JEAN C 1651 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent O "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03.02 or more recent) attached. Use of a Customer Number is required. attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE G&W AUST PF.LE. Fairfield, USW (New South Wales), Australia Vindividual O corporation or other private group entity O government Please check the appropriate assignce category or categories (will not be printed on the patent); 4b. Payment of Fce(s): 4a. The following fee(s) are enclosed: Issue Fee A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. ☐ Publication Fee C) The Director is hereby authorized by charge the required fec(s), or credit any overpayment, to Deposit Account Number ______ (enclose an extra copy of this form). Advance Order - # of Copics Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. (Date) 23/09/2004 (Authorized Signature) 09/27/2004 MBIZUNE2 00000019 09937721 NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. 665,00 OP 01 FC:2501

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